

REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Mail Stop REISSUE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney Docket No.	09617.1001
First Named Inventor	Talaber et al.
Original Patent Number	6,261,291
Original Patent Issue Date (Month/Day/Year)	07/17/2001
Express Mail Label No.	ER 203737890 us

APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/ 56)
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent
format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy) UNSIGNED
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☒ Power of Attorney UNSIGNED
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☒ Written Consent of all Assignees (PTO/SB/53) UNSIGNED
 - ☒ 37 C.F.R. § 3.73(b) Statement UNSIGNED
(PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)
or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status and support for all changes
to the claims. See 37 CFR 1.173 (c).
11. ☐ Original U.S. Patent for surrender
 - ☐ Ribbonded Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS
Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: Offer to submit original
Letters Patent

18. CORRESPONDENCE ADDRESS


Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

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24,422

Signature

Edward J. Lynch

Date

July 15, 2003

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 U.S. PTO
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07/15/03

PTO/SB/56 (04-01)

Approved for use through 01/31/2004. OMB 0651-0033

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REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

09617.1001

Claims as Filed - Part 1

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
(A) 28	Total Claims (37 CFR 1.16(j))	(B) 62	**** 34 =	x \$ 9 =	306.00	or	x \$ =
(C) 4	Independent claims (37 CFR 1.16(i))	(D) 10	* 6 =	x \$ 42 =	252.00		x \$ =
Basic Fee (37 CFR 1.16(h))					\$ 375.00		
Total Filing Fee					\$ 933.00	OR	\$

Claims as Amended - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ =		x \$ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ =		x \$ =	
Total Additional Fee					\$	OR	\$	

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

☒ Applicant claims small entity status. See 37 CFR 1.27.

☒ Please charge Deposit Account No. 04-1679 in the amount of 933.00.
A duplicate copy of this sheet is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 04-1679.
A duplicate copy of this sheet is enclosed.

☐ A check in the amount of \$ _____ to cover the filing / additional fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

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July 15, 2003
Date

Edward J. Lynch
Signature of Applicant, Attorney or Agent of Record
Edward J. Lynch, Reg. No. 24,422
Typed or printed name